



Adaptive Recreation Activity Registration Form - Winter 2005

Registration begins November 21, 2005 at 9:00 a.m.

Your payment, payable to: County of Loudoun, must accompany each form for complete registration.

Checks must include Social Security Number or Driver's License Number.

IMPORTANT: Please refer to the General Information page of the Newsletter for trip policies and procedures.

Participant Name _____ Social Security # _____ DOB(MM/DD/YY) _____

Street Address _____

City _____ State _____ Zip _____

Primary Guardian(s) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Activity Number	Name of Activity	Date(s)	Do You Need Transportation? (Please Circle)	Transportation Locations (Please Circle) Depart From	Transportation Locations (Please Circle) Return to	Trans. Total	Activity Total	Total Cost
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			
			YES NO	NOVA ECHO DCC HOME	NOVA DCC HOME			

For mail-in credit card payments please complete the following

Total Amount Due:

Name as it appears on Credit Card _____ Signature of Cardholder _____

Credit Card Account Number _____ Expiration Date _____

Credit Card Type (Check One) Visa _____ MasterCard _____ Total Amount of Fees Charged _____